Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

6064

| (Column 1) (Column 2)   |   |   |                                    |                                    |              |                  |          | SMALL ENTITY TYPE  |                        |         | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|---|---|---|------------------------------------|------------------------------------|--------------|------------------|----------|--------------------|------------------------|---------|-------------------------------|------------------------|--|
| TOTAL CLAIMS  |   |   | 1~                                 |                                    | 100.0        |                  |          |                    | <br>1                  | OR<br>7 |                               |                        |  |
| FOR   |   |   | 5                                  |                                    |              | AULIADED EVERA   |          | . RATE             | FEE                    |         | RATE.                         | FEE                    |  |
| POH .   |   |   | NUMBER FILED                       |                                    | NUMBER EXTRA |                  |          | BASIC FEE          | 385.00                 | OR      | BASIC FEE                     | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | 6 minus 20= *                      |                                    |              | )                |          | X\$ 9=             |                        | OR      | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS  |   |   | minus 3 =                          |                                    |              |                  |          | X43=               |                        | OR      | X86=                          |                        |  |
| Μl  | JLTIPLE DEPEI   | NDENT CLAIM P                               | RESENT                             |                                    |              |                  |          | +145=              |                        | OR      | +290=                         | 299                    |  |
| * 11  | the difference  | e in column 1 is                            | less than zero, enter "0" in colum |                                    |              | column 2         |          | TOTAL              |                        | OR      | TOTAL                         | 060                    |  |
| CLAIMS AS AMENDED - PART II   |   |   |                                    |                                    |              |                  |          |                    |                        | ] •     | OTHER                         | THAN                   |  |
|   |   | (Column 1)                                  |                                    |                                    |              | (Column 3)       |          | SMALL              | ENTITY                 | OR      | SMALL                         |                        |  |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                    | HIGHI<br>NUME<br>PREVIO<br>PAID F  | BER<br>OUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *   | Minus                              | **                                 |              | =                |          | X\$ 9=             | -                      | OR      | X\$18=                        |                        |  |
|   | Independent   | *   | Minus                              | ***                                |              | -                |          | X43=               |                        | OR      | X86=                          |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                    |                                    |              |                  |          | +145=              |                        | OR      | +290=                         |                        |  |
|   |   |   |                                    |                                    |              |                  |          | TOTAL<br>DDIT. FEE |                        | OR      | TOTAL<br>ADDIT. FEE           |                        |  |
|   |   | (Column 1)                                  |                                    | (Colum                             | nn 2)        | (Column 3)       |          | DUII. FEE I        | <del></del>            | •       | ADDII. FEE                    |                        |  |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>· AFTER<br>AMENDMENT |                                    | HIGHE<br>NUME<br>PREVIO<br>PAID F  | BER<br>USLY  | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *   | Minus                              | **                                 | -,,,,        | =                |          | X\$ 9=             | . ==                   | OR      | X\$18=                        |                        |  |
|   | Independent   | *   | Minus                              | ***                                | -            | = .              |          | X43=               |                        |         | X86=                          |                        |  |
| ٩   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                    |                                    |              |                  |          | 7,10-              |                        | OR      | 7,00-                         |                        |  |
|   |   |   |                                    |                                    | •            |                  | L        | +145=              |                        | OR      | +290=                         |                        |  |
|   |   | ٠   |                                    |                                    |              |                  | A        | TOTAL<br>DDIT, FEE |                        | OR      | TOTAL<br>ADDIT. FEE           |                        |  |
|   |   | (Column 1)                                  |                                    | (Colum                             |              | (Column 3)       |          |                    | • . • .                |         |                               |                        |  |
| AMENDMENT C   | `   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                    | HIGHE<br>NUMB<br>PREVIOI<br>PAID F | ER<br>USLY   | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *   | Minus                              | **                                 |              | =                |          | X\$ 9=             |                        | OR      | X\$18=                        |                        |  |
|   | Independent   | *   | Minus                              | ***                                |              | =                | $\vdash$ | X43=               |                        |         | X86=                          |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                    |                                    |              |                  | -        | 7.10-              |                        | OR      | 700-                          |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |                                    |                                    |              |                  |          |                    | <del></del>            | OR      | +290=                         | ·                      |  |
| ***   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                                    |                                    |              |                  |          |                    |                        |         |                               |                        |  |